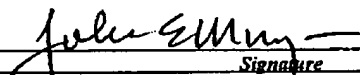
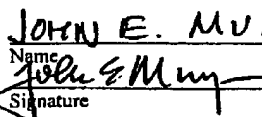


DEC 05 2005

<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>				Docket No. <b>ARD-101US</b>	
Applicant(s): <b>Ardern</b>					
Application No. <b>10/664,634</b>	Filing Date <b>09/19/2003</b>	Examiner <b>Gary Chapman Hoge</b>	Customer No. <b>24314</b>	Group Art Unit <b>3611</b>	Confirmation No.
Invention: <b>Binder Clip Sleeve</b>					
<b><u>COMMISSIONER FOR PATENTS:</u></b>					
Transmitted herewith is an amendment in the above-identified application.					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	32 -	26 =	6	x \$25.00	\$150.00
INDEP. CLAIMS	4 -	3 =	1	x \$100.00	\$100.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$250.00</b>
<input type="checkbox"/> No additional fee is required for amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. <b>10-0270</b> in the amount of <b>\$250.00</b> <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>10-0270</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>					
 John E. Munger, Reg. No. 37,685 Jansson, Shupe, Munger & Antaramian, Ltd. 245 Main Street Racine, WI 53403 262/632-6900			Dated: <b>December 5, 2005</b>  <b>CERTIFICATE OF FACSIMILE TRANSMISSION</b>  I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on the date shown below:  <div style="display: flex; justify-content: space-between;"> <div>             Name: <b>JOHN E. MUNGER</b>            Signature         </div> <div> <b>12/05/05</b>            Date         </div> </div>		
CC:					

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GROUP ART UNIT 3611**

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<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/943,692
	Filing Date	09/19/2003 <b>RECEIVED</b>
	First Named Inventor	Ardern <b>CENTRAL FAX CENTER</b>
	Art Unit	3611 <b>DEC 05 2005</b>
	Examiner Name	Hoge
Total Number of Pages in This Submission	Attorney Docket Number ARD-101US	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Jansson, Shupe, Munger & Antaramian, Ltd.		
Signature			
Printed name	John E. Munger		
Date	December 5, 2005	Reg. No.	37,685

I hereby certify that this sufficient postage as of the date shown below:

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:

William B. Ardern II

Attorney Docket No. ARD-101US

Serial No. 10/664,634

Group Art Unit: 3611

Filed: September 19, 2003

Examiner: Gary Chapman Hoge

Title: BINDER CLIP SLEEVE

\* \* \* \* \*

December 5, 2005

MAIL STOP AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**PRELIMINARY AMENDMENT  
AND CERTIFICATE OF FACSIMILE TRANSMISSION**

Sir:

Before acting on the Request for Continued Examination filed November 17, 2005, please enter this preliminary amendment. After this amendment, claims 1-15 and 17-33 are in the application. Kindly amend the application as reflected below:

**Amendments to the Claims** begin at page 2 of this Amendment.

**Remarks** begin at page 9 of this Amendment.

12/06/2005 AKELECH1 00000044 100270 10664634

01 FC:2201 100.00 DA  
02 FC:2202 150.00 DA